

Done:  
DR. R. R. GREEN  
375 E. 2ND STREET  
HEBER CITY, UTAH  
84032

Done: *for me*

1. Bulk Spring *Spring*  
2. Jars " *Spring*  
3. Sugar " *Spring*  
4. Biscuits " *Spring*  
5. Butter " *Spring*  
6. Biscuits " *Spring*  
7. Pancakes " *Spring*  
8. Hamburger " *Spring*  
9. Hot dogs " *Spring*  
10. Cucumber " *Spring*  
11. Bacon " *Spring*  
12. Frost " *Spring*  
13. Cattler " *Spring*  
14. Biscuit man " *Spring*  
15. *Spring* un-named

Project: *Strawberry Valley*  
Season: *Spring*

84032  
HEBER CITY, UTAH  
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DR. R. R. GREEN, M.D.

## RECEIPT OF INDIVIDUAL FOR CHILD

I, \_\_\_\_\_, being authorized  
(name of individual)  
by the parents of \_\_\_\_\_, to receive  
(name of child)  
their child, do hereby acknowledge receipt from \_\_\_\_\_  
Hospital of \_\_\_\_\_  
(name of child)

ગુરૂપાલ માણસ  
શાહનગર